

Children's Hospital Boston Shares a Description of the Care Transition Work of their Division of Critical Care Medicine

[“The Division of Critical Care Medicine”](#) at [Children's Hospital Boston](#) has made substantial progress in improving patient care transitions in the Pediatric Intensive Care Unit (PICU). Through an innovative and evidence-based care coordination initiative entitled **"ADAPT"** (Advancing care Delivery Across Providers & Transitions), the Division has been successful in improving family and external caregiver collaboration in care decisions and planning, increasing the continuity of care provided to patients, and reducing length of stay in the ICU. This comprehensive systems-based approach has proactively reinforced the three most vulnerable areas in care transition: ICU admission, service handoffs and discharge from the PICU.

At admission, the PCP Initiative is a service effort that establishes communication with the patient's primary care provider. When a patient is admitted to the PICU, the Critical Care office calls their PCP to notify them of the admission and how to contact the intensivist to collaborate on care. During their PICU stay, the Proactive Case Management intervention seeks to harness existing multi-professional ICU leadership into a cohesive panel that meets twice a week to identify and mitigate barriers to optimal ICU and hospital discharge. Upon discharge, an adaptor program, The Critical Care, Anesthesia, Perioperative Extension (CAPE) and Home Ventilation Program, targets children with respiratory technology dependence. This component of ADAPT serves as a comprehensive, longitudinal service for children with chronic respiratory insufficiency, technology dependence and related medical complexities.

[If you are interested in learning more about Children's Hospital Boston's care transition work and improvements please contact:](#)

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